

Financial Aid

Shippensburg University
1871 Old Main Drive
Shippensburg, PA 17257-2299



www.ship.edu

Office: 717-477-1131
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**PHEAA COLLEGE ENROLLMENT CHANGE
STUDENT AUTHORIZATION STATEMENT**

Student's Name

Social Security Number

xxx-xx- _____

Student's Home Address

Name of School:

Shippensburg University

OE College Code:

00332600

Award Year: 2020-2021

Fall & Spring Semester

Fall Semester Only

Spring Semester Only

Housing Status: (Check one)

Dormitory

Off-Campus (Living away from home and not in dormitory housing)

Commuter (Living at home with parents)

By signing this statement, I authorize the institution referenced above to request and receive any and all information contained in my 2020-21 PHEAA State Grant Record on file with the Pennsylvania Higher Education Assistance Agency (PHEAA). I understand that all information submitted to PHEAA may be released to the institution listed above for the purpose of evaluating my eligibility for financial assistance. I further authorize PHEAA to forward to the herein-named postsecondary institution all information on the Application and all information subsequently submitted to or acquired by the Agency.

Date

Student's Signature

This document should be maintained in the student's file at the institution. If the institution has on file a signed copy of the Free Application for Federal Student Aid (FAFSA), a signed Student Aid Report (SAR), or the student's actual enrollment at this institution has been certified, this form does not need to be completed.